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031004

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Address to: MS: Patent Application
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

UTILITY PATENT APPLICATION TRANSMITTAL AND FEE SHEET

Transmitted herewith for filing under 37 CFR §1.53(b) is the utility patent application of

Applicant (or identifier): CARNEY ET AL.

Title: METHOD AND KITS FOR MONITORING WOMEN'S HEALTH

Enclosed are:

1. Specification (Including Claims and Abstract) - 49 pages
2. Drawings - 1 sheets
3. Executed Declaration and Power of Attorney (original or copy)
4. Microfiche Computer Program (appendix)
5. Nucleotide and/or Amino Acid Sequence Submission
 - Computer Readable Copy
 - Paper Copy
 - Statement Verifying Identity of Above Copies
6. Preliminary Amendment
7. Assignment Papers (Cover Sheet & Document(s))
8. English Translation of
9. Information Disclosure Statement
10. Certified Copy of Priority Document(s)
11. Return Receipt Postcard
12. Other:

Filing fee calculation:

Before calculating the filing fee, please enter the enclosed Preliminary Amendment.
 Before calculating the filing fee, please cancel claims

Basic Filing Fee							\$ 770
Multiple Dependent Claim Fee (\$ 290)							\$
Foreign Language Surcharge (\$ 900)							\$
	For	Number Filed		Number Extra		Rate	
Extra Claims	Total Claims	91	-20	71	x	\$ 18	= \$ 1,278
	Independent Claims	7	-3	4	x	\$ 86	= \$ 344
TOTAL FILING FEE							\$ 2,392

Please charge Deposit Account No. 50-2965 in the name of Ciba Vision in the amount of \$2,392. An additional copy of this paper is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.16 and §1.17 which may be

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required in connection with this application, or credit any overpayment, to Deposit Account No. 50-2965 in the name of Ciba Vision.

Please address all correspondence to the address associated with Customer No. 31781, which is currently:

Robert J. Gorman, Jr.
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Please direct all telephone calls to the undersigned at the number given below, and all telefaxes to (678) 415-3068.

Respectfully submitted,

Date: *March 10, 2004*



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